



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Center for Quality Assurance and Control
10 West Street, Boston, MA 02111
617-753-8000

MITT ROMNEY
GOVERNOR

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LIEUTENANT GOVERNOR

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COMMISSIONER

Circular Letter: DHCQ 05-06-449

TO: Long Term Care Nursing Facility Administrators

FROM: Paul I. Dreyer, Ph.D., Associate Commissioner

DATE: June 15, 2005

RE: Automated External Defibrillators (AEDs) in Nursing Facilities

Introduction

The Department of Public Health recently promulgated amendments to the long term care facility licensure regulations at 105 CMR 150.002(l) that require each nursing facility to put into operation at least one automated external defibrillator (AED) by November 30, 2005. Attached please find a copy of the amendments (Attachment A). To view the memorandum that was presented to the Public Health Council regarding the amendments on May 24, 2005, please go to: <http://www.mass.gov/dph/dhcq/hcqskel.htm>. The effective date of the amendments is June 17, 2005.

Additional Requirements

The amendments require the Administrator to develop policies and procedures related to having an AED in the facility and its maintenance and use. Designated staff must be trained and certified in Cardiopulmonary Resuscitation (CPR) and the use of an AED through a course that meets or exceeds American Heart Association (AHA) standards.

The facility must also designate a physician as the AED medical director, who may be the current facility medical director. This physician will oversee the AED activities within the facility, including staff training, equipment maintenance and

review of all cardiac arrests in the facility, and coordinate them with the local emergency medical response system (EMS). The locally designated emergency (“911”) ambulance service needs to be informed that an AED is available in the facility. In addition, the medical director should collaborate with the local ambulance service and first responders to assess AED activity in the facility for quality assurance and improvement purposes. This should include, but is not limited to, assessing ‘time to defibrillation’ in mock drills and each time the AED is used.

The regulations require a minimum of one AED per facility, but depending on the size of your facility and in order to meet the optimal timeframes (3 to 5 minutes from collapse to first shock) for delivering a shock to a person in cardiac arrest, you may find it appropriate to have more than one AED in your facility.

Questions to Consider

As you begin preparations to make AEDs available in your facility there are a few basic questions you will need to consider. These include:

- Who will be your AED medical director?
- Which staff will be trained in CPR/AED?
- Which staff will be made aware of AED availability and trained to activate an AED response?
- What equipment (brand) and supplies will you purchase?
- How many AEDs are needed for your facility?
- What information do the residents need regarding AEDs and how will we inform them?
- What information will be collected and reviewed to assess the quality of the AED service in your facility?

American Heart Association (AHA) Information and Training

The American Heart Association, in its efforts to reduce disability and death from cardiovascular disease, offers training in CPR and AEDs. You can access your local AHA office, training information, as well as general information about AEDs, the development of an AED program (including implementation checklists), AED vendors, placement of AEDs in your facility, and other related issues on the AHA website at www.americanheart.org . For assistance you may also contact the American Heart Association’s Regional Emergency Cardiac Care (ECC) Service Center toll free at 888-277-5463.

American Red Cross (ARC) Training

The American Red Cross, in its efforts to help prepare and respond to emergencies, also offers CPR/AED training. For the office near you please view: <http://www.bostonredcross.org/contactus.cfm> . For additional information about

training please go to <http://store.yahoo.com/coursereg/adultcpaed.html> or you may call Mary Taddie, American Red Cross Manager of Health and Safety, at 617-375-0700 ext.229.

Links

Other websites that may provide useful information include:

The National Center for Early Defibrillation <http://www.early-defib.org/default.asp>

The Heart Rhythm Society <http://www.hrsonline.org/>

The U.S. Food and Drug Administration

<http://www.fda.gov/hearthealth/treatments/medicaldevices/aed.html>

If you have questions about this letter, please contact Jill Mazzola at 617-753-8106.

cc Abraham Morse, President, Mass. Extended Care Federation
Elissa Sherman, President, Mass. Aging Services Association
Susan Lawton, Mass. Association of Residential Care Homes
Allyson Doyle, Director of Advocacy, AHA
David Hiltz, Emergency Cardiovascular Care Programs, AHA
Mary Taddie, Manager of Health and Safety, ARC
Regional EMS Executive Directors
Regional EMS Medical Directors

Attachment A

Amendments to Long Term Care Facility Licensure Regulations at 105 CMR 150.002(I)

105 CMR 150.002 (I)

No later than November 30, 2005, the administrator of a nursing facility shall acquire an automated external defibrillator and develop policies and procedures for the rendering of automated external defibrillation in the facility.

- (1) All persons certified to provide automated external defibrillation shall
 - a. successfully complete a course in cardiopulmonary resuscitation and in the use of an automated external defibrillator that meets or exceeds the standards established by the American Heart Association or the American National Red Cross;
 - b. have evidence that course completion is current and not expired.
- (2) For the purposes of this regulation, the facility shall contract with or employ a physician who shall be the automated external defibrillation medical director for the facility.
 - a. The medical director shall oversee and coordinate the automated external defibrillation activities of the facility including:
 - i. maintenance and testing of equipment in accordance with manufacturer's guidelines;
 - ii. certification and training of facility personnel;
 - iii. periodic performance review of the facility automated external defibrillation activity.
 - b. The medical director shall integrate the facility automated external defibrillation activity with the local Emergency Medical response system.